

OFFICE OF ECONOMIC OPPORTUNITY

**FY 2008 APPLICATION INSTRUCTIONS
(July 1, 2008 - June 30, 2009)**

**Weatherization Assistance Program
Heating and Air Repair and Replacement Program**

**North Carolina Department of Health and Human Services
Office of Economic Opportunity
2013 Mail Service Center
Raleigh, North Carolina 27699-2013
Telephone: (919) 715-5850
Fax: (919) 715-5855
Website: <http://www.ncdhhs.gov/oeo>**

APPLICATION INSTRUCTIONS

The following is information on completing specific components of the grant application. Please read carefully and follow instructions. If there is any aspect of this application that needs further clarification, please contact the Program Analyst assigned to your agency.

The grant application is due by close-of-business on March 3, 2008; only one copy is required. Failure to submit application on time or to make changes deemed necessary may result in a delay in the start of the grant. All information requested should be submitted and the application should **not** be stapled or permanently bound in any way. Paper clips, binder clips and rubber bands are permissible. All attachments should be clearly labeled and placed at the end of the application.

Please type in your agency's name on page one of the application, in the space provided.

SECTION I. IDENTIFICATION

Please provide the information requested.

SECTION II. CERTIFICATION

Original signatures are needed for the grant application to be officially certified.

SECTION III. PROGRAM NARRATIVE

1. The recruitment should include specific tasks that will result in increased client enrollment in the listed targeted demographics. These activities may include speaking at local churches, civics groups, and meeting with other organizations who may be source of clients. If your agency has had problems recruiting clients from certain areas of your community, please include any strategies to bolster recruitment.
2. Please provide a table showing the energy burden and the energy expenditures of the households your agency has served from July 1, 2007- December 31, 2007. This information can be obtained from AR4CA. A table should list the *percentages* of households your agency has served that have an energy burden of 10-14%, 15-21%, 21-29%, 30% and over, high energy burden and the average annual energy expenditure. Please view the example below:

Energy Burden 10% to 14%	8%
Energy Burden 15% to 21%	14%
Energy Burden 22% to 29%	5%
Energy Burden 30% and over	27%
High Energy Burden	46%
Average Annual Energy Expenditure	\$1,516

PROGRAM NARRATIVE (Cont.)

3. Please ensure all staff that appears on the budget, also appears on this page and the position titles here are the same position titles that are on the budget. Agencies without an indirect cost rate must list all management and support staff involved with weatherization. Both current resume and the job description must be included with the application. Current resume must include any weatherization training received by the staff (including lead safe, mold and moisture, mobile home, and whole house) as well as the date(s) attended. Please **do not** send copies of certifications along with resume.
4. The agency wide organization chart must contain **all** positions listed and all the major positions at the agency as a whole. Please ensure that weatherization positions on the chart match the positions that appear in on the budget.
5. Answer “yes” to this question if your agency is planning to contract out shell work, insulation, and duct sealing. Answer “no” to this question if your agency uses a crew to do most of your weatherization work. (Not applicable to this question are HVAC contractors, plumber, and electricians)
6. Please provide requested information.

PROGRAM NARRATIVE (Cont.)

7. Please provide the requested information.
8. Please attach the requested information.
9. Please ensure that your written procedures adheres to the 2007 NC Weatherization State Plan, Section III.3.3 Final Inspection. Policies that do not adhere to the guidelines may be sent back to your agency for revision.
10. Leveraged funds consist of any additional money used to aid weatherization. Leveraged funds should result in an increase in the total number of units completed, the ability to spend more per unit than the current maximum average, or a reduction in the money need by your agency to weatherized contracted units. In the case of volunteer labor or donated material, estimated amounts should be provided. So if you usually pay \$25 an hour for a job a similar pay scale should be used for volunteer labor.

PROGRAM NARRATIVE (Cont.)

11. **Any non-OEO** sponsored training should be provided here. If there is a projected cost involved then the training and the associated cost should show up on the budget.

SECTION IV. PROJECT IDENTIFICATION (WX)

Mark the One-Year Submission with an X.

1. Provided
2. Provided
3. Please provide the **total** Weatherization Assistance Program allocation here. This includes T&TA, Single Audit, Administration, Liability Insurance and Program Operations.
4. Please provide number of households that your agency expects to serve during the year. This number can only be determined after the budget is completed, as it is based on Materials plus Program Operations divided by the FY 2008 maximum average unit cost. Please note that this number should **always** be rounded up, not down. So even if you calculate that you need 99.0001 units, the number of households you must complete is 100. If any changes that affect total budget of either Materials or Program Operations are made, verify that minimum number of households served reflects those changes.

SECTION V. PROJECT DESCRIPTION (WX & HAARP)

The first blank should contain the minimum number of households done and should match the Number of Households served from number 4 in section IV. The area after the colon should list the counties that will be served by the agencies followed by the number of units that should be completed by county. Please note that these projected units should be *based solely on the number of households in poverty* in the counties that your agency will serve. For instance, if you have 3 counties and 60 households to serve the total number of units **would not** automatically be 20 households per county. If these three counties have 2300, 400, and 7300 households in poverty, then the households should be split 14, 2, and 44, respectively.

The Implementation Schedule should include both the job title of the person performing the work and how many households are projected to be targeted or completed per quarter. Please note that the marketing number should be higher than the targeted completion number for any given quarter.

SECTION IV. PROJECT IDENTIFICATION (WX)

Mark the One-Year Submission with an X.

1. Provided
2. Provided
3. Please provide the **total** HAARP allocation here.
4. Please provide number of households that your agency expects to serve during the year. This number should be based on both the allocation and past expenditures in HAARP.